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| Fill in this information to identify your case: | |
|---|--|
| United States Bankruptcy Court for the: Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yourself | | |
|--|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Kendall | |
| | First name | First name |
| Write the name that is on your government-issued | L | ACT III |
| picture identification (for example, your driver's | Middle name | Middle name |
| license or passport | Banks Last name | Last name |
| Bring your picture | | |
| identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | NA: alalla in anna | Mi della manna |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | | |
| | First name | First name |
| | Middle name | Middle name |
| | | |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX- 2557 | xxx - xx- |
| Security number or | OR | OR |
| federal Individual Taxpayer | 9 xx - xx- | 9 xx - xx- |
| Identification number (ITIN) | | |

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| D | ebtor 1 Kendall First Name | L Banks Middle Name Last Name | Case number (if known) |
|----|--|--|--|
| | THOUNG | Wild de Name | |
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 4. | Any business names and Employer | I have not used any business names or EINs. | I have not used any business names or EINs. |
| | Identification Numbers (EIN) you have used in the last | Business name | Business name |
| | 8 years | Business name | Business name |
| | Include trade names and doing business as names | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 1314 S 6th Ave Number Street | Number Street |
| | | Maywood Illinois 60153 | City. Chale |
| | | City State Zip Code Cook | City State Zip Code |
| | | County If your mailing address is different from the one | County If Debtor 2's mailing address is different from yours, |
| | | above, fill it in here. Note that the court will send any notices to you at this mailing address. | fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number Street | Number Street |
| | | | |
| | | City State Zip Code | City State Zip Code |
| 6. | Why you are choosing this district | Check one: | Check one: |
| | to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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| Debtor 1 Kendall | L | | Case number (if known) | |
|---|---|---|---|--|
| First Name | Middle Name | Last Name | | |
| Part 2: Tell the Court Abo | out Your Bankruptcy C | ase | | |
| 7. The chapter of the Bankruptcy Code you are choosing to file under | | description of each, see <i>Notice Req</i> (0)). Also, go to the top of page 1 and | | |
| 8. How you will pay the fee | more details about cashier's check, or may pay with a cree I need to pay the findividuals to Pay I request that my finding may, but is not the official poverty you choose this open. | how you may pay. Typically, if you money order If your attorney is dit card or check with a pre-printer fee in installments. If you choose Your Filing Fee in Installments (Offee be waived (You may request not required to, waive your fee, and line that applies to your family signals. | ou are paying the fee submitting your pay ed address. e this option, sign an official Form 103A). this option only if you d may do so only if you | clerk's office in your local court for e yourself, you may pay with cash, yment on your behalf, your attorney and attach the <i>Application for</i> ou are filing for Chapter 7. By law, a your income is less than 150% of ole to pay the fee in installments). If hapter 7 Filing Fee Waived (Official |
| 9. Have you filed for bankruptcy within the last 8 years? | ✓ No. Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY Cas | se numberse numberse number |
| 10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | Cas MM / DD / YYYY Rela | lationship to you se number, if known lationship to you se number, if known |
| 11. Do you rent your residence? | ✓ No. Go to | ord obtained an eviction judgment and line 12. Let Initial Statement About an Eviction bankruptcy petition. | | |

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| De | btor 1 Kendall | | L | | Banks | Case number (| (if known) | |
|---|---|------------------|---|---------------------------|------------------|---|------------|----------|
| | First Name | | | | ast Name | | | |
| Pa | rt 3: Report About Any | Busir | nesses | s You Own as a Sole | Proprietor | | | |
| | Are you a sole proprietor of any full- | ✓ | No. | Go to Part 4. | | | | |
| | or part-time business? | | Yes. | Name and location of | f business | | | |
| | A sole proprietorship is a business you | | | Name of business, if a | any | | | |
| | operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | Number | Street | | | |
| | If you have more than one sole | | | City | | State | Zip Code | |
| | proprietorship, use a separate sheet and | | | Check the appropria | ate box to desc | ribe your business: | | |
| attach it to this Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | | | | | |
| petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | | | | | |
| Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | | | | | |
| Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | | | | | |
| | | | | None of the ab | oove | | | |
| | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). | appir shee exist | ropriate t, state t, follow No. No. Yes. | | | | | |
| | • | | | , | ,, | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | Do you own or have any property that poses or is alleged to | | No. Yes. | What is the hazard? | | | | |
| | pose a threat of imminent and | | | If immediate attention is | needed, why is i | t needed? | | |
| | identifiable hazard to public health or safety? Or do you | | | Where is the property? | | | | |
| | own any property that needs immediate attention? | | | willere is the property: | Number | Street | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | | | City | State | • | Zip Code |

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 Debtor 1
 Kendall First Name
 L
 Banks
 Case number (if known)

 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Kendall First Name | L Middle Name | Banks Last Name | Case number (if known) | | | |
|---|---|--|---|---|--|--|
| | estions for Reporting | | | | | |
| 16. What kind of debts do you have? | "incurred by an No. Go to lin Yes. Go to lin 16b. Are your debts money for a bus No. Go to lin Yes. Go to lin | individual primarily for a pene 16b. ine 17. primarily business debts? siness or investment or throne 16c. | ersonal, family, or househo Business debts are debts ough the operation of the b | that you incurred to obtain ousiness or investment. | | |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Yes. I am filing und | under Chapter 7. Go to line 18 er Chapter 7. Do you estimate paid that funds will be availab | e that after any exempt prope | erty is excluded and administrative creditors? | | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | 1,000-3 5,001- 10,001 | | 25,001-50,000 50,001-100,000 More than 100,000 | | |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill | \$10,00 000 \$50,00 | ,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill | \$10,00 000 \$50,00 | ,001-\$10 million 0,001-\$50 million 0,001-\$100 million 00,001-\$500 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion | | |
| Part 7: Sign Below | | | | | | |
| For you | correct. If I have chosen to file of title 11, United Sta under Chapter 7. If no attorney represed out this document, I have correct. | e under Chapter 7, I am awa tes Code. I understand the nts me and I did not pay or nave obtained and read the | re that I may proceed, if el relief available under each agree to pay someone wh notice required by 11 U.S | | | |
| | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | | | |
| | /s/ Kendall Bank | | × | | | |
| | Signature of Debtor | | Signature of De | | | |
| | Executed on | 2/22/2017 MM / DD / YYYY | Executed on | MM / DD / YYYY | | |

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| Debtor 1 Kendall First Name | L Middle Name | Banks Last Name | Case number (if ki | nown) |
|---|--|---|---|---|
| For your attorney, if you are represented by one If you are not represented by an attorney, you do not | eligibility to proceed und relief available under ead debtor(s) the notice requ have no knowledge after | der Chapter 7, 11, 12 ch chapter for which t iired by 11 U.S.C. § 3 | , or 13 of title 11, United the person is eligible. I als 42(b) and, in a case in w | ave informed the debtor(s) about States Code, and have explained the so certify that I have delivered to the hich § 707(b)(4)(D) applies, certify that I ales filed with the petition is incorrect. |
| need to file this page. | /s/ Ryan P Crotty Signature of Attorney f | or Debtor | Date MN | 2/22/2017 M / DD / YYYY |
| | Printed name Semrad Law Firm | | | |
| | Firm name 20 S. Clark Street | | | |
| | Street 28th Floor | | | |
| | Chicago City | | Illinois State | 60603 Zip Code |
| | Contact phone | 3128374032 | Email address | rcrotty@semradlaw.com |
| | 6312602 Bar number | | Illinois State | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Kendall | L | Banks |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

| Check if this is an |
|---------------------|
| amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|--|---|
| . Schedule A/B: Property (Official Form 106A/B) | \$0.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | <u>·</u> |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$500.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$500.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | , |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) | \$0.00 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | <u></u> |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$86,974.00 |
| Your total liabilities | \$86,974.00 |
| Part 3: Summarize Your Income and Expenses | |
| | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$2,063.69 |
| | |
| 5. Schedule J: Your Expenses (Official Form 106J) | |

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| Debt | | Kendall | L | Banks | Case number (if known) | | | | | | |
|---------------|--|--|-------------------------------|---|---|----------|--|--|--|--|--|
| Dort | _ | First Name | Middle Name | Last Name | rde | | | | | | |
| Part 4 | Part 4: Answer These Questions for Administrative and Statistical Records | | | | | | | | | | |
| 6. A ı | 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? | | | | | | | | | | |
| | No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. | | | | | | | | | | |
| Ī | ✓ Yes. | | | | | | | | | | |
| 7 14 | 7. What kind of debt do you have? | | | | | | | | | | |
| /. W | | • | | | | | | | | | |
| Ŀ | | | | ner debts are those incurred t Il out lines 8-10 for statistical | by an individual primarily for a personal, purposes. 28 U.S.C. § 159. | | | | | | |
| Г | ٦ Yc | our debts are not primarily | consumer debts. You | u have nothing to report on th | nis part of the form. Check this box and subr | nit | | | | | |
| | d thi | is form to the court with you | r other schedules. | | | | | | | | |
| 8. F | rom | the Statement of Your Cui | rrent Monthly Income | : Copy your total current mor | nthly income from Official | \$344.00 | | | | | |
| | | 122A-1 Line 11; OR , Form | | | • | | | | | | |
| 9. | Con | the following special eat | agarias of alaims from | m Part / line 6 of Schodule | E/E- | | | | | | |
| J. | | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: | | | | | | | | | |
| | Fron | n Part 4 on Schedule E/F, o | copy the following: | Total claim | | | | | | | |
| | 9a. D | Domestic support obligations | s (Copy line 6a.) | | \$0.00 | | | | | | |
| | | | , ,, | (O l' Ob.) | \$0.00 | | | | | | |
| | 9b. I | Taxes and certain other debts | s you owe the governm | ient. (Copy line 6b.) | <u>:</u> | | | | | | |
| | 9c. C | Claims for death or personal i | injury while you were in | toxicated. (Copy line 6c.) | \$0.00 | | | | | | |
| | 9d. S | Student loans. (Copy line 6f.) |) | | \$55,099.00 | | | | | | |
| | 9e. Obligations arising out of a separation agreement or div priority claims. (Copy line 6g.) | | divorce that you did not repo | ort as \$0.00 | | | | | | | |
| | | | , | | | | | | | | |
| | 9f D | ebts to pension or profit-sha | aring plans, and other s | similar debts (Copy line 6h.) | \$0.00 | | | | | | |
| | J D | coto to pondion or pront one | g piano, ana otnor o | | | | | | | | |

\$55,099.00

9g. Total. Add lines 9a through 9f.

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| Fill in this | information to ident | tify your case: | | | | |
|--|---|--|---|---|--|--|
| Debtor 1 | | 1 | Panko | | | |
| Deptor i | Kendall First Name | Middle N | Banks lame Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if fil | ing) First Name | Middle N | ame Last Name | | | |
| United Sta | tes Bankruptcy Cou | rt for the: Northern | District of Illinois (State) | | | |
| Case num | ber | | (etaio) | | | |
| | | | | | Check if this is an | |
| Officia | l Form 106/ | <u>4/B</u> | | | amended filing | |
| Sched | dule A/B: F | roperty | | | 12/1 | |
| category v responsibl write your | where you think it f e for supplying cor name and case nu | its best. Be as complete a rect information. If more s mber (if known). Answer e | • • | ple are filing together, both a this form. On the top of any a | re equally | |
| | | | nd, or Other Real Estate You Own or H | | | |
| | own or have any long to No. Go to Part 2 | egal or equitable interest | n any residence, building, land, or similar p | roperty? | | |
| | | | | | | |
| ш | Yes. Where is the pr | operty? | | | | |
| 1.1 | | | What is the property? Check all that apply. Single-family home | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> | |
| 1 | Street address, if available, or other description | | Duplex or multi-unit building | Creditors Who Have Claims Secured by Property | | |
| | | | Condominium or cooperative | Current value of the | Current value of the | |
| | | | Manufactured or mobile home | entire property? | portion you own? | |
| | Number Street | , | Land | December 11 | | |
| | Number Street | | Investment property | Describe the nature o interest (such as fee s | | |
| | City | State Zip Code | Timeshare Other | the entireties, or a life | e estate), if known. | |
| | | | Who has an interest in the property? Chec | | mmunity property | |
| | | | one. Debtor 1 only | | | |
| | | | Debtor 2 only | | | |
| | | | Debtor 1 and Debtor 2 only | | | |
| | | | At least one of the debtors and another | | | |
| | | | Other information you wish to add about t | his item, such as local | | |
| If you | own or have more th | nan one list here: | property identification number: | | | |
| n you | own or navo more a | ian one, not note. | What is the property? Check all that apply. | | claims or exemptions. Put | |
| 1.2 | Street address if av | ailable, or other description | Single-family home | | red claims on Schedule D: nims Secured by Property. | |
| | Olieet address, ii av | aliable, of other description | Duplex or multi-unit building | Current value of the | Current value of the | |
| | | | Condominium or cooperative | entire property? | portion you own? | |
| | | | Manufactured or mobile home Land | | | |
| | Number Street | | Investment property | Describe the nature o | | |
| | | | Timeshare | interest (such as fee s the entireties, or a life | | |
| | City | State Zip Code | Other | , | | |
| | | | Who has an interest in the property? Checone. | | mmunity property | |
| | | | Debtor 1 only | | | |
| | | | Debtor 2 only | | | |
| | | | Debtor 1 and Debtor 2 only | | | |
| | | | At least one of the debtors and another | | | |
| | | | Other information you wish to add about t property identification number: | his item, such as local | | |

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| Debtor 1 | | L | Banks | Case number | (if known) | |
|-------------------------------|---|---|--|-----------------|--|---|
| | First Name | Middle Name | Last Name | | | |
| 1.3Stre | et address, if available, or o | ther description Zip Code | Last Name What is the property? Check all that a Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? | pply. | Do not deduct secured the amount of any secu | imple, tenancy by e estate), if known. |
| 2. Add | the dollar value of the po | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and Other information you wish to add a property identification number: all of your entries from Part 1, include | bout this item, | | |
| you ha | ve attached for Part 1. W | rite that number l | here. | | | |
| Do you ov you own t | hat someone else drives. If ans, trucks, tractors, sport u | equitable interes you lease a vehicle, | st in any vehicles, whether they are r also report it on Schedule G: Executory rcycles | - | - | |
| 3.1 | Make Model: Year: | | Who has an interest in the propone. Debtor 1 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | | Current value of the entire property? | Current value of the portion you own? |
| 3.2 | Make Model: Year: Approximate mileage: | <u> </u> | Who has an interest in the propone. Debtor 1 only Debtor 2 only | erty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Other information: | | Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community prinstructions) | | entire property? | portion you own? |

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| | Kendall | L | Banks | Case numb | 01 (111010111) | |
|------|---|-------------|--|--|--|---|
| | First Name | Middle Name | Last Name | | | |
| 3.3 | Make | | Who has an interest in the p | roperty? Check | Do not deduct secured | · · |
| | Model: | | one. | | the amount of any secu | |
| | Year: | | Debtor 1 only | | Creditors vvno Have Cia | nims Secured by Property |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | / | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | |
| | | | Check if this is communi | | | |
| | | | instructions) | ty property (see | | |
| | | | , | | 5 | |
| 3.4 | Make Model: | | Who has an interest in the poone. | roperty? Check | Do not deduct secured the amount of any secu | claims or exemptions. P |
| | Year: | | Debtor 1 only | | • | nims Secured by Propert |
| | Approximate mileage: | | | | | |
| | | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | / | entire property? | portion you own? |
| | | | At least one of the debtors | and another | | · |
| | | | Check if this is communi | ty property (see | | |
| | | | instructions) | | | |
| Exan | | | ner recreational vehicles, other vehicles, other vehicles, other vehicles, methods in the state of the state | | | |
| Exan | nples: Boats, trailers, motor No Yes Make | | ner recreational vehicles, other vehicles, other vehicles, must be seen that the seen that the policy of the seen that the seen | otorcycle accessor | Do not deduct secured | • |
| Exan | nples: Boats, trailers, motor No Yes Make Model: | | ter recreational vehicles, other vents, fishing vessels, snowmobiles, m Who has an interest in the prone. | otorcycle accessor | Do not deduct secured the amount of any secu | |
| Exan | nples: Boats, trailers, motor No Yes Make Model: Year: | | who has an interest in the prone. Debtor 1 only | otorcycle accessor | Do not deduct secured the amount of any secu | · · |
| Exan | nples: Boats, trailers, motor No Yes Make Model: | | ter recreational vehicles, other vents, fishing vessels, snowmobiles, m Who has an interest in the prone. | otorcycle accessor | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| Exan | nples: Boats, trailers, motor No Yes Make Model: Year: | | who has an interest in the prone. Debtor 1 only | otorcycle accessor | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Property |
| Exan | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only | otorcycle accessor roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| Exan | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | otorcycle accessor roperty? Check / and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| Exan | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors | otorcycle accessor roperty? Check / and another | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motor No Yes Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communications) | otorcycle accessor roperty? Check / and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communication. | otorcycle accessor roperty? Check / and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. F |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communing instructions) Who has an interest in the property of the debtors in the debtor in the debtors in the debtor | otorcycle accessor roperty? Check / and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. F |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communiinstructions) Who has an interest in the prone. | otorcycle accessor roperty? Check / and another ty property (see | Do not deduct secured the amount of any secu Creditors Who Have Classian Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classian Creditors Who Have Classian Control | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communinstructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only | otorcycle accessor roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Clater Current value of the entire property? Do not deduct secured the amount of any secured. | claims on Schedule sims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Other information: Make Model: Year: | | who has an interest in the prone. Debtor 1 only Debtor 2 only At least one of the debtors Check if this is communiinstructions) Who has an interest in the prone. Debtor 1 and Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only | otorcycle accessor roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the |
| 4.1 | nples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors Check if this is communinstructions) Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 2 only | roperty? Check and another ty property (see roperty? Check | Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Class Current value of the | red claims on Schedule hims Secured by Property Current value of the portion you own? claims or exemptions. Pared claims on Schedule hims Secured by Property Current value of the |

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| D | ebtor 1 | Kendall First Name | | L Middle Name | Banks Last Name | Case number (if known) | |
|----------|--------------------------------|--------------------------------|--|----------------------|---|-------------------------------------|---|
| Pa | art 3: | Describe Y | our Personal a | | | | |
| D | o you | own or hav | e any legal or e | equitable inter | est in any of the followi | ng items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Examp | _ | and furnishings liances, furniture, I | linens, china, kitch | enware | | |
| <u>✓</u> | No Yes. D | Describe | Used Household (| Goods | | | \$100.00 |
| | 7. Elect Examp No | | s and radios; audio | o, video, stereo, ar | nd digital equipment; compu | uters, printers, scanners; music | |
| ✓ | Yes. D | Describe | Used Cell Phone | | | | \$50.00 |
| | | • | and figurines; paint | • | her artwork; books, pictures, r collections, memorabilia, co | • | |
| | No Yes. D | Describe | | | | | |
| | | les: Sports, pl | orts and hobbies notographic, exerci | | | Il tables, golf clubs, skis; canoes | |
| ✓ | No | , | | | | | |
| | Yes. D | Describe | | | | | |
| | I 0. Fire Examp | | les, shotguns, amr | munition, and rela | ted equipment | | |
| ✓ | No |) | | | | | |
| Ц | res. L | Describe | | | | | |
| | I 1. Clot Examp | | clothes, furs, leath | er coats, designer | wear, shoes, accessories | | |
| | No | N | | | | | |
| ✓ | Yes. L | Describe | Used Clothing | | | | \$250.00 |
| | _ | - | | ewelry, engagemer | nt rings, wedding rings, heirl | oom jewelry, watches, gems, | |
| \leq | No No |) oo orib o | | | | | |
| Ш | res. L | Describe | | | | | |
| | | -farm animal les: Dogs, cat | s s, birds, horses | | | | |
| ✓ | No Yes. D | Describe | | | | | |
| 1 | l4. Any | other persor | al and household | d items you did n | ot already list, including a | nny health aids you did not list | |
| ~ | No | | | | | | |
| Ī | Yes. D | Describe | | | | | |
| | | | alue of all of your t number here | | | for pages you have attached | \$400.00 |

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| Debte | or 1 Kendall First Name | L Middle Name | Banks Last Name | Case number (if known) | |
|--------------|--|---|---------------------------|--|--|
| Part 4 | | | Last Name | | |
| Do y | ou own or have an | y legal or equitable interest | in any of the followir | ng? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. C | camples: Money you ha | ve in your wallet, in your home, in | | on hand when you file your petition Cash: | |
| | | avings, or other financial accounts stitutions. If you have multiple acc | | ares in credit unions, brokerage houses, | |
| | ✓ Yes | | Institution name: | | |
| | | 17.1. Checking account: | Rush Prepaid Debit Care | d | \$100.00 |
| | | 17.2. Checking account: | | | |
| | | 17.3. Savings account: | | | |
| | | 17.4. Savings account: | - | | · - |
| | | 17.5. Certificates of deposit: | | | |
| | | 17.6. Other financial account: | | | · . |
| | | 17.7. Other financial account: | | | |
| | | 17.8. Other financial account: | | | |
| | | 17.9. Other financial account: | | | |
| | | or publicly traded stocks , investment accounts with broker | age firms, money market a | accounts | |
| | ✓ No Yes | Institution or issuer name: | | | |
| | | | | | |
| 4.0 | Maria de Partir de La Companya de L | | | h de la companya de l | |
| 19. | an LLC, partnership, a | • | ted and unincorporated | businesses, including an interest in | |
| | Yes. Give specific information about them | Name of entity | | % of ownership: | |
| | นเฉม | | | | |

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| Debt | tor 1 Kendall | L | Banks | Case number (if known) | |
|------|--|---|-----------------------------|--|---|
| | First Name | Middle Name | Last Name | | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer assuer name: | checks, promissory not | tes, and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in II | | . thrift savings accounts | , or other pension or profit-sharing plans | |
| | No No | 11 (, E1110) (, 100g11, 101(ty, 100(5) | , timit davings accounts | , or ourse portion or pront offaring plane | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | | - | | |
| | | IRA: | | | |
| | | Retirement account: | | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public Electric: | | | |
| | _ | | | | |
| | | Gas: | | | |
| | | Heating oil: | | | - |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | | | |
| | | Telephone: | | | |
| | | Water: | | | |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract for | or a periodic payment of money to | you, either for life or for | a number of years) | |
| | ✓ No ☐ Yes | Issuer name and description: | | | |
| | | | | | _ |
| | | | | | |
| | | | | | |

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| Debt | tor 1 Kendall First Name | L Banks Case Middle Name Last Name | number (if known) | |
|------|---|---|--|---|
| 24. | | an education IRA, in an account in a qualified ABLE program, or under a qual | ified state tuition program | |
| | 26 U.S.C. §§ | 530(b)(1), 529A(b), and 529(b)(1). | | |
| | ✓ No Yes | Institution name and description. Separately file the records of any interests.11 U.S. | S.C. § 521(c): | |
| | | | | |
| | | | | |
| 25. | | table or future interests in property (other than anything listed in line 1), and for your benefit | rights or powers | |
| | ✓ No Yes. Desc | oviho. | | 1 |
| | L Tes. Desc | Gibe | | |
| 26. | | pyrights, trademarks, trade secrets, and other intellectual property | | |
| | | ternet domain names, websites, proceeds from royalties and licensing agreements | | |
| | ✓ No Yes. Desc | cribe | | |
| | | | | |
| 27. | | anchises, and other general intangibles uilding permits, exclusive licenses, cooperative association holdings, liquor licenses, | professional licenses | |
| | No No | anding permits, exclusive licenses, cooperative association moralings, liquol licenses, | professional licenses | |
| | Yes. Desc | cribe | | |
| | | | | |
| | | | | |
| Mor | ney or prope | rty owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | ney or proper | | | portion you own? Do not deduct secured |
| | Tax refunds o | owed to you | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds of ✓ No Yes. Give about | specific information ut them, including whether | Federal: | portion you own? Do not deduct secured claims or exemptions. |
| | Tax refunds or No Yes. Give about | specific information | State: | portion you own? Do not deduct secured claims or exemptions. \$0.00 |
| 28. | Tax refunds or No Yes. Give about your and a | specific information ut them, including whether already filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or No Yes. Give: about your and: Family support Examples: Pass | specific information ut them, including whether already filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years | State: Local: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years | State: Local: settlement, property settlemen | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years | State: Local: settlement, property settlemer Alimony: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years | State: Local: settlement, property settlemer Alimony: Maintenance: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give about your and a second s | specific information ut them, including whether already filed the returns the tax years | State: Local: settlement, property settlemer Alimony: Maintenance: Support: | portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 tt \$0.00 \$0.00 \$0.00 \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give: about you a and a Family support Examples: Past ✓ No Yes. Give: Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: Settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 28. | Tax refunds or No Yes. Give: about you a and a Family suppor Examples: Pass No Yes. Give: | specific information ut them, including whether already filed the returns the tax years | State: Local: Settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |
| 28. | Tax refunds or ✓ No Yes. Give: about you a and a Family support Examples: Past ✓ No Yes. Give: Other amount Examples: Unp | specific information ut them, including whether already filed the returns the tax years | State: Local: Settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement: | \$0.00 |

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| Deb | tor 1 Kendall | L | Banks | Case number (if known) | |
|------|--|----------------------------|---|---|---|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance Examples: Health, disabi | | alth savings account (HSA); credit, | homeowner's, or renter's insurance | |
| | Yes. Name the insur of each policy and li | | Company name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in propert If you are the beneficiary property because some | of a living trust, expect | | cy, or are currently entitled to receive | _ |
| | No Yes. Describe | | | | |
| 33. | | | you have filed a lawsuit or made rrance claims, or rights to sue | e a demand for payment | |
| | No Yes. Describe | | | | |
| 34. | Other contingent and to set off claims | unliquidated claims of | every nature, including counter | claims of the debtor and rights | |
| | ✓ No Yes. Describe | | | | |
| 35. | Any financial assets yo | ou did not already list | | | |
| | No Yes. Describe | | | | |
| 36. | | - | n Part 4, including any entries t | | \$100.00 |
| Part | 5: Describe Any Ru | usiness-Related Pro | nerty You Own or Have an | nterest In. List any real estate in Pa | rt 1 |
| | | | | | |
| 37. | - | iy iegai oi equitable in | terest in any business-related p | operty: | Current value of the |
| | No. Go to Part 6. Yes. Go to line 38. | | | | portion you own? Do not deduct secured claims or exemptions |
| 38. | Accounts receivable o | r commissions you alre | eady earned | | or oxionipuone |
| | ✓ No Yes. Describe | | | | |
| 39. | Office equipment, furn Examples: Business-rela | | , modems, printers, copiers, fax m | achines, rugs, telephones, desks, chairs, ele | ctronic devices |
| | No Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Kendall | L | Banks | Case number (if known) | |
|-------|--------------------------------|------------------------------------|--|--------------------------------|--|
| | First Name | Middle Name | Last Name | _ | |
| 40. | Machinery, fixtures, e | equipment, supplies you t | ise in business, and tools of your t | rade | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| | | | | | |
| 41. | Inventory | | | | |
| | ✓ No | | | | |
| | Yes. Describe | | | | |
| | _ | | | | |
| 40 | | | | | |
| 42. | Interests in partnersh | iips or joint ventures | | | |
| | ✓ No | | Name of entity: | % of ownership: | |
| | Yes. Give specific | | Name of entity. | 70 Of Ownership. | |
| | information about them | | | | <u> </u> |
| | urem | | | | |
| | | | | | |
| 40 | O | . | | | |
| 43. | Customer lists, mailing | lists, or other compilation | ons | | |
| | ✓ No | | | | |
| | Yes. Do your lists i | nclude personally identifiab | le information (as defined in 11 U.S.0 | C. § 101(41A))? | |
| | ☐ No | | | | |
| | Yes. Desc | ribo | | | |
| | les. Desc | 11DE | | | |
| 44. | Any business-related | property you did not alre | ady list | | |
| | ✓ No | | | | |
| | lacksquare | | | | |
| | Yes. Give specific information | | | | |
| | inomation | | | | |
| | | | | | _ |
| | | | | | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | <u> </u> |
| | | | | | |
| | | | art 5, including any entries for pag | | |
| or Pa | art 5. Write that numbe | er nere | | | |
| Part | 6: Describe Any F | arm- and Commercia | I Fishing-Related Property Yo | ou Own or Have an Interest In. | |
| | If you own or have ar | n interest in farmland, list it in | Part 1. | | |
| 46. | Do you own or have a | iny legal or equitable into | erest in any farm- or commercial f | ishing-related property? | |
| | | | • | | Current value of the |
| | No. Go to Part 7. | | | | portion you own? |
| | Yes. Go to line 47. | • | | | Do not deduct secured claims or exemptions |
| 47 | Farm animals | | | | or exemptions |
| 77. | Examples: Livestock, p | oultry, farm-raised fish | | | |
| | No No | | | | |
| | <u> </u> | | | | |
| | Yes. Describe | | | | |
| | | | | | |

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| Debtor 1 | Kendall First Name | L Middle Name | Banks Last Name | Case number (if known) | |
|------------------|---|--|------------------------|------------------------------|---|
| 48. Cr | ops-either growing | or harvested | | | |
| <u> </u> | No Yes. Describe | | | | |
| 49. Fa | rm and fishing equi | pment, implements, machinery, f | ixtures, and tools of | ftrade | |
| ✓ | No | | | | |
| | Yes. Describe | | | | |
| 50. Fa | rm and fishing supp | lies, chemicals, and feed | | | |
| ✓ | No | | | | |
| | Yes. Describe | | | | |
| | | | | | |
| 51. An | • | rcial fishing-related property you | ı did not already list | | |
| | No Yes. Describe | | | | |
| | • | | | | |
| E0 V441 | the deller value of a | II of your entries from Part 6, inc | ludina ony ontrino fo | or nages you have attached | |
| | | r here | | | |
| | | | | | |
| | - | | | | |
| Part 7: | | perty You Own or Have an II | | u Did Not List Above | |
| | | perty of any kind you did not alre s, country club membership | eady list? | | |
| ✓ | No | | | | |
| | Yes. Give specific information | | | | |
| | | | | | |
| | | | | | |
| 54. Add t | the dollar value of a | ll of your entries from Part 7. Wri | te that number here | · | <u> </u> |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8: | List the Totals of | f Each Part of this Form | | | |
| 55. Part | t 1: Total real estate | e, line 2 | | > | |
| 50 1 | . O 4-4-1 | F | | | |
| _ | 2 total vehicles, ling 3: Total personal ar | nd household items, line 15 | \$400.00 | | |
| 58. Part | 4: Total financial as | ssets, line 36 | \$100.00 | | |
| 59. Part | t 5: Total business-r | elated property, line 45 | \$100.00 | | |
| 60. Part | 6: Total farm- and | fishing-related property, line 52 | | | |
| 61. Part | 7: Total other prop | erty not listed, line 54 | | | |
| 62. Tot a | al personal property | . Add lines 56 through 61 | \$500.00 | | + \$500.00 |
| | | | | Copy personal property total | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| | | Schodulo A/P Add line 55 + line 60 | 2 | | \$500.00 |

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| ill in this | information to identify your case: | | | |
|--|---|--|---|--|
| Debtor 1 | Kendall | L | Banks | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| Spouse, if fili | First Name | Middle Name | Last Name | |
| Jnited Sta | tes Bankruptcy Court for the: No | rthern D | District of Illinois | |
| Case num fknown) | ber | | (State) | |
| Officia | al Form 106C | | | Check if this is amended filing |
| ched | lule C: The Propert | ty You Claim a | s Exempt | 12/ |
| - | | | - | |
| ne amou nx-exem nder a la pur exer Part 1: | ant of any applicable statutor apt retirement funds—may b aw that limits the exemption aption would be limited to the dentify the Property You Clai th set of exemptions are you clai | ry limit. Some exemptive unlimited in dollar at to a particular dollar ne applicable statutor aim as Exempt | tions—such as those for health aids, amount. However, if you claim an exert amount and the value of the propertry amount. If your spouse is filing with you. | rights to receive certain benefits, and emption of 100% of fair market value |
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☐ No

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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| Debt | or 1 Kendall L First Name Midd | dle Name | Banks Case number (if knot Last Name | own) |
|------|---|---|---|------------------------------------|
| Part | 2: Additional Page | | | |
| 1 | Brief description of the property and ine on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| l | Brief description: Used Cell Phone Line from Schedule A/B: 07 | \$50.00 | \$50.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| l | Brief description: Checking account, Rush Prepaid Debit Card Line from Schedule A/B: 17 | \$100.00 | \$100.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |

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| | | | 9 | | | |
|------------------------|--------------------------------|--|---|---|-----------------------------------|------------------------------------|
| Fill in this info | rmation to identify your o | case: | | | | |
| Debtor 1 | Kendall | L | Banks | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| | | • | (State) | | | |
| Case number (If known) | | | | | | |
| Official | Form 106D | | | J | | Check if this is an amended filing |
| Schedi | ule D: Credi | tors Who Hav | ve Claims Secure | ed by Prop | erty | 12/15 |
| more space is | | | e are filing together, both are equ nber the entries, and attach it to t | | | |
| 1. Do any | creditors have claims | secured by your propert | ty? | | | |
| ✓ No. | Check this box and sub | mit this form to the court v | vith your other schedules. You hav | e nothing else to repo | ort on this form. | |
| Yes. | . Fill in all of the informati | on below. | | | | |
| Part 1: List | All Secured Claims | | | | | |
| | | | red claim, list the creditor separately | Column A | Column B | Column C |
| | | editor has a particular claim, alphabetical order according | list the other creditors in Part 2. As g to the creditor's name. | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports | Unsecured portion |

this claim

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| E-11 · | | and the state of the state of | | | | | | |
|-------------------|---|---|---|--|---|--------------------------|-------------------|--------------------------------|
| FIII II | n this intor | mation to identify your c | ase: | | | | | |
| Debt | tor 1 | Kendall | L | Banks | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| Debt | | | | | | | | |
| (Spot | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Unite | ed States E | Bankruptcy Court for the: | Northern | District of Illinois | | | | |
| | | | | (State) | | | | |
| Case (If kno | e number | | | | | | | |
| ` | | | | | | | and if this is a | n amandad filing |
| Off | icial F | orm 106E/F | | | | | eck ii triis is a | n amended filing |
| 20 | hadı | ula E/EL Cra | ditoro Who | Have Hase | cured Claims | | | |
| <u> </u> | neut | LIE E/F. CIE | CULTOL 2 ANTIO | nave onse | cureu Ciaiilis | | | 12/15 |
| Form claim | 106A/B) and the strate in the | and on Schedule G: Exe e listed in Schedule D: (he boxes on the left. At | cutory Contracts and Unc Creditors Who Hold Claims | expired Leases (Official l s Secured by Property. If | Also list executory contracts Form 106G). Do not include a f more space is needed, copy top of any additional pages, v | ny credito the Part y | rs with partion | ally secured it out, number |
| 1. | Do any c | reditors have priority ur | nsecured claims against y | rou? | | | | |
| No. Go to Part 2. | | | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, idea As much Continuat | ntify what type of claim it as possible, list the claims ion Page of Part 1. If moi | is. If a claim has both priori | ty and nonpriority amount ding to the creditor's name particular claim, list the oth | | both priorit | ty and nonprio | ority amounts. |
| | | | | | | Total | Priority | Nonpriority |

claim

amount

amount

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| Debte | or 1 Kendall | | L | Banks | Case number (if known) | | | |
|--------|---|---|-------------------------|---------------|---|-------------|--|--|
| | First Name | | Middle Name | Last Name | | | | |
| Part | | of Your NONPRIO | | | | | | |
| [| o any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. | | | | | | | |
| l I | List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. | | | | | | | |
| | | | | | | Total claim | | |
| 4.1 | Nonpriority (1015 COBB | ES & LEASE OW Creditor's Name B PLACE BLVD NW | | | ast 4 digits of account number 8020 When was the debt incurred? 1/1/2016 | \$1,006.00 | | |
| | Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 6 Check | State ed the debt? Check of 1 only | Zip ne. d another | 144 Code [| Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 001 Lease | | | |
| | Yes | | | | | | | |
| 4.2 | Atlanta City Who incurre Debtor 2 Debtor 3 At least Check | Street Georg State ed the debt? Check of 1 only | Zip ne. d another | 348 Code [| As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Phone Bill | \$160.00 | | |
| 4.3 | Bank of Ame Nonpriority (1701 River (Number | Creditor's Name | | v | As of the date you file, the claim is: Check all that apply. Contingent | \$500.00 | | |
| | Debtor 2 Debtor 2 Debtor 3 Debtor 4 Debtor 6 Check | State ed the debt? Check of 1 only | Zip ne. d another |]]] | Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify NSF | | | |

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Bradley K Sullivan, Attorney at Law \$2,720.00 Last 4 digits of account number Nonpriority Creditor's Name 221 South LaSalle Street Suite 1906 When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60601 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Judgement 2012-M1-700709 Is the claim subject to offset? **✓** No Yes City of Chicago Parking \$0.00 Last 4 digits of account number _ Nonpriority Creditor's Name 121 N. LaSalle St # 107A When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60602 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Notice Only Is the claim subject to offset? **✓** No Yes 4.6 Comcast \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11621 E. Marginal Way # 5 n/a Number Street As of the date you file, the claim is: Check all that apply. Bankruptcy Dept Contingent Unliquidated Washington 98168 Seattle Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Cable Bill Is the claim subject to offset?

✓ No Yes

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 DirecTV \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2230 E Imperial Hwy Number As of the date you file, the claim is: Check all that apply. ATTN Bankruptcy Contingent Unliquidated 90245 El Segundo California City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Cable Bill Is the claim subject to offset? **✓** No T Yes ENHANCED RECOVERY CO L \$923.00 4.8 7055 Last 4 digits of account number _ Nonpriority Creditor's Name 2/1/2016 When was the debt incurred? 8014 BAYBERRY RD Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated JACKSONVILLE Florida 32256 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Other. Specify ORIGINAL CREDITOR: TMOBILE Is the claim subject to offset? **✓** No Yes FIFTH THIRD BANK \$1,200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5050 KINGSLEY DR n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CINCINNATI 45227 Ohio Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt NSF Other. Specify _

✓ No Yes

Is the claim subject to offset?

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 FONDREN, BRIAN T \$3,074.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 5923 S Artesian Ave As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60629 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Judgement 2016-M4-000992 Is the claim subject to offset? **✓** No Yes 4.11 HARVARD COLL \$464.00 5834 Last 4 digits of account number ___ Nonpriority Creditor's Name 4/1/2015 4839 N Elston Ave When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60630 Chicago Illinois Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CRÉDITOR: 04 IL **✓** No **DEPT OF HUMAN SVCS** Other, Specify Yes **IDES Bankruptcy Department** 4.12 \$10,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 33 S State St Ste 800 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60603 Chicago Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Overpayment of Benefits Is the claim subject to offset? **✓** No

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 IL Depart of Revenue \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 64338 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60664 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Notice Only Is the claim subject to offset? **✓** No Yes 4.14 IRS 1 \$0.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 7346 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Philadelphia Pennsylvania 19101 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Notice Only Other. Specify ___ Is the claim subject to offset? **✓** No Yes ISAC 4.15 \$4,653.00 Last 4 digits of account number 4502 Nonpriority Creditor's Name When was the debt incurred? 1/1/2013 PO Box 6180 Number Street As of the date you file, the claim is: Check all that apply. Contingent Indiana 46206 Indianapolis Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ Is the claim subject to offset? **✓** No

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 **ISAC** \$3,808.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/1/2013 PO Box 6180 Number Street As of the date you file, the claim is: Check all that apply. Contingent 46206 Indianapolis Indiana Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.17 ISAC \$3,656.00 Last 4 digits of account number 4501 Nonpriority Creditor's Name When was the debt incurred? 1/1/2013 PO Box 6180 Number Street As of the date you file, the claim is: Check all that apply. Contingent Indiana 46206 Indianapolis Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.18 ISAC \$3,445.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6180 When was the debt incurred? 1/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent 46206 Indiana Indianapolis Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 **ISAC** \$3,424.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/1/2013 PO Box 6180 Number Street As of the date you file, the claim is: Check all that apply. Contingent 46206 Indianapolis Indiana Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes 4.20 ISAC \$3,130.00 Last 4 digits of account number 4506 Nonpriority Creditor's Name When was the debt incurred? 1/1/2013 PO Box 6180 Number Street As of the date you file, the claim is: Check all that apply. Contingent Indiana 46206 Indianapolis Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes JEFFERSON CAPITAL SYST 4.21 \$1,171.00 Last 4 digits of account number Nonpriority Creditor's Name 16 MCLELAND RD When was the debt incurred? 6/1/2016 Number As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify 001 UnknownLoanType Is the claim subject to offset? No

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| Debtor | 1 Kendall L Banks | Case number (if known) | | | | | | | |
|---------|---|--|-------------|--|--|--|--|--|--|
| | First Name Middle Name Last Nam | ne | | | | | | | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Continuation | n Page | | | | | | | |
| | | | | | | | | | |
| | After listing any entries on this page, number them beginning w | vith 4.5, followed by 4.6, and so forth. | Total claim | | | | | | |
| 4.22 | JPMORGAN CHASE BANK | Last 4 digits of account number | \$300.00 | | | | | | |
| | Nonpriority Creditor's Name | <u> </u> | | | | | | | |
| | 2000 MARCUS AVENUE | When was the debt incurred?n/a | | | | | | | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | | | | | | | |
| | | Contingent | | | | | | | |
| | | \ | | | | | | | |
| | NEW HYDE PARK New York 11042 | Unliquidated | | | | | | | |
| | City State Zip Code | Disputed | | | | | | | |
| | Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | ✓ Debtor 1 only | <u> </u> | | | | | | | |
| | Debtor 2 only | Student loans | | | | | | | |
| | | Obligations arising out of a separation agreement or | | | | | | | |
| | Debtor 1 and Debtor 2 only | divorce that you did not report as priority claims | | | | | | | |
| | At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Check if this claim relates to a community debt | Other. Specify NSF | | | | | | | |
| | Is the claim subject to offset? | | | | | | | | |
| | ✓ No | | | | | | | | |
| | Yes | | | | | | | | |
| | | | | | | | | | |
| | MBB | Last 4 digits of account number 5876 | \$1,156.00 | | | | | | |
| | Nonpriority Creditor's Name 1550 N NORTWEST HWY STE 403 | When was the debt incurred? 2/1/2015 | | | | | | | |
| | Number Street | | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | | | |
| | | Contingent | | | | | | | |
| | PARK RIDGE Illinois 60068 | Unliquidated | | | | | | | |
| | City State Zip Code | 불 ' | | | | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | | | | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | Debtor 2 only | Student loans | | | | | | | |
| | Debtor 1 and Debtor 2 only | 불 | | | | | | | |
| | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | | | |
| | At least one of the debtors and another | | | | | | | | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Is the claim subject to offset? | 004 Oallastias Oallastias for | | | | | | | |
| | | ORIGINAL CREDITOR: MEDICAL | | | | | | | |
| | ✓ No | Other. Specify PAYMENT DATA | | | | | | | |
| | Yes | | | | | | | | |
| 4.24 | MBB | | \$783.00 | | | | | | |
| | Nonpriority Creditor's Name | Last 4 digits of account number 5778 | \$763.00 | | | | | | |
| | 1550 N NORTWEST HWY STE 403 | When was the debt incurred? 8/1/2015 | | | | | | | |
| | Number Street | As of the date of the the date to Charlett that each | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | | | |
| | DADK DIDGE III:n nin COOCO | Contingent | | | | | | | |
| | PARK RIDGE Illinois 60068 City State Zip Code | Unliquidated | | | | | | | |
| | Who incurred the debt? Check one. | Disputed | | | | | | | |
| | Debtor 1 only | | | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | | | |
| | | Student loans | | | | | | | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | At least one of the debtors and another | | | | | | | | |
| | | | | | | | | | |
| | Check if this claim relates to a community debt | | | | | | | | |
| | Is the claim subject to offset? | 001 Collection; Collecting for | | | | | | | |
| | ✓ No | ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA | | | | | | | |
| | ■ □ Voc | TATIVILITE DATA | | | | | | | |
| | Yes | | | | | | | | |

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 MERCHANTS CREDIT GUIDE \$1,260.00 Last 4 digits of account number Nonpriority Creditor's Name 223 W JACKSON BLVD # 700 When was the debt incurred? 3/1/2016 As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60606 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes 4.26 NATIONWIDE CREDIT & CO \$302.00 Last 4 digits of account number 8966 Nonpriority Creditor's Name 815 COMMERCE DR STE 270 When was the debt incurred? 7/1/2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent OAK BROOK Illinois 60523 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes Northern Illinois University 4.27 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1425 W Lincoln Hwy When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60115 Dekalb City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? **✓** No

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 PLS - Bankruptcy \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1 S Wacker Dr Fl 36 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60606 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? **✓** No Yes 4.29 Smith, Leon \$0.00 Last 4 digits of account number _ Nonpriority Creditor's Name 2219 Saint Charles Rd When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bellwood Illinois 60104 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Notice Only Other. Specify ___ Is the claim subject to offset? **✓** No Yes TCF Bank 4.30 \$600.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1405 Xenium Ln N Ste 180 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 55441 Minneapolis Minnesota City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ NSF Is the claim subject to offset? **✓** No Yes

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 **TORRES CRDIT** \$156.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 10/1/2016 27 fairview st suite 301 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated CARLISLE 17013 Pennsylvania City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt 001 Collection; Collecting for **|** ORIGINAL CREDITOR: 10 Is the claim subject to offset? Other. Specify COMMONWEALTH EDISON CO **✓** No Yes 4.32 U S DEPT OF ED/GSL/ATL \$20,918.00 6091 Last 4 digits of account number _ Nonpriority Creditor's Name When was the debt incurred? 4/1/2009 PO BOX 2287 Number As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30301 Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes U S DEPT OF ED/GSL/ATL 4.33 \$12,065.00 Last 4 digits of account number 6511 Nonpriority Creditor's Name PO BOX 2287 When was the debt incurred? 4/1/2009 Number As of the date you file, the claim is: Check all that apply. Contingent 30301 ATLANTA Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes

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Banks Debtor 1 Kendall Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.34 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 425 Walnut Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 45202 Cincinnati Ohio City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ NSF Is the claim subject to offset? **✓** No Yes 4.35 Village of Bellwood \$1,500.00 Last 4 digits of account number _ Nonpriority Creditor's Name 3200 Washington Blvd When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Bellwood Illinois 60104 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Parking Tickets Is the claim subject to offset? **✓** No Yes Village of Forest Park 4.36 \$1,500.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 517 Desplaines Ave n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60130 Forest Park Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Parking Tickets Is the claim subject to offset? **✓** No Yes

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| Debtor 1 | | L | Banks | Case number (if known) | | | | |
|----------|--|-------------------------|-----------------|---|-------------|--|--|--|
| | First Name | Middle Name | Last Name | | | | | |
| Part 2: | Your NONPRIORITY Unsecured Claims - Continuation Page | | | | | | | |
| 4 | After listing any entries on thi | s page, number them beg | ginning with 4. | 5, followed by 4.6, and so forth. | Total claim | | | |
| | Village of Oak Park Nonpriority Creditor's Name P.O. Box 457 Number Street | | | st 4 digits of account numbern/a | \$100.00 | | | |
| | Number Street | | | As of the date you file, the claim is: Check all that apply. | | | | |
| - | | | | Contingent | | | | |
| ١, | Wheelina Illino | is 60090 | | Unliquidated | | | | |
| - | City State | | | Disputed | | | | |
| | Who incurred the debt? Check Debtor 1 only | cone. | Туј | Type of NONPRIORITY unsecured claim: | | | | |
| | Debtor 2 only | | | Student loans | | | | |
| | Debtor 1 and Debtor 2 only | | | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | claims | | | |
| | At least one of the debtors a | and another | | Debts to pension or profit-sharing plans, and other similar debts | | | | |
| | Check if this claim relates | s to a community debt | √ | Other. Specify Parking Ticket | | | | |
| i | s the claim subject to offset? | | L. | | | | | |
| | ✓ No | | | | | | | |
| | Yes | | | | | | | |

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Debtor 1 Kendall L Banks Case number (if known)
First Name Middle Name Last Name

| collection agenc collection agenc | y is trying to colle y here. Similarly, i | ct from you for a deb f you have more thai | ot you owe to someon one creditor for an | ne else, list the o y of the debts tha | u already listed in Parts 1 or 2. For example, if a riginal creditor in Parts 1 or 2, then list the it you listed in Parts 1 or 2, list the additional r 2, do not fill out or submit this page. |
|--------------------------------------|--|---|---|---|--|
| Loyola Univeristy Name | Health Systems | | On which entry | / in Part 1 or Part | t 2 did you list the original creditor? |
| 2160 S. First Ave | | | Line 4.25 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured |
| Maywood | Illinois | 60153 | Last 4 digits of | account number | Claims Claims |
| City | State | Zip Code | | | |
| West Lake Hospita Name | al | | On which entry | in Part 1 or Part | t 2 did you list the original creditor? |
| 1225 w lake st | | | Line 4.25 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | t | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims |
| Melrose Park | Illinois | 60160 | Last 4 digits of | account number | |
| City | State | Zip Code | | | |
| Verizon Wireless Name | | | On which entry | in Part 1 or Part | t 2 did you list the original creditor? |
| 777 Big Timber R | Rd | | Line 4.21 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | one): | ✓ Part 2: Creditors with Nonpriority Unsecured Claims |
| Elgin | Illinois | 60123 | Last 4 digits of | account number | |
| Dity | State | Zip Code | | | |
| Mobile | | | On which onto | in Port 1 or Port | t 2 did you list the original graditor? |
| lame | | | On which entry | III Fart I OF Fari | t 2 did you list the original creditor? |
| P.O. Box 742596 | | | Line 4.8 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | t | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims |
| Cincinnati | Ohio | 45274 | Last 4 digits of | account number | 7055 |
| City | State | Zip Code | | | |
| Comed | | | | | |
| lame | | | On which entry | in Part 1 or Part | t 2 did you list the original creditor? |
| Po Box 805379 | | | Line 4.31 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | t | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | Illinois | 60680 | l set 4 digite of | account number | 4834 |
| Dity | State | Zip Code | Last 4 digits 01 | account number | |
| J.S. Attorney Gen | neral | | | | |
| lame | | | On which entry | in Part 1 or Part | t 2 did you list the original creditor? |
| 219 S. Dearborn S | St., 5th Floor | | Line 4.12 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | t | | <u> </u> | one): | ✓ Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | Illinois | 60604 | Last 4 digits of | account number | |
| Dity | State | Zip Code | | | |
| Arnold Scott Harri: Name | S | | On which entr | in Part 1 or Part | t 2 did you list the original creditor? |
| Tan 16 | | | | | |
| I 11 W. Jackson # Number Street | | | Line 4.5 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Chicago | Illinois | 60604 | Last 4 digits of | account number | Claims |
| City | State | Zip Code | | 2300ant namber | |

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Banks Last Name Debtor 1 Kendall First Name Case number (if known) Middle Name

| Part 4: Add th | ne Amounts for Each Type of Unsecured Claim | | | | | |
|---|---|-----|------------------|--|--|--|
| 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. | | | | | | |
| | | | Total claims | | | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | a. \$0.00 | | | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | b. = \$0.00 | | | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | c\$0.00 | | | |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$0.00 d. | | | |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 e. | | | |
| | | | Total claims | | | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$55,099.00 | | | |
| nom rait 2 | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | g. <u>\$0.00</u> | | | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | h\$0.00 | | | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$31,875.00 | | | |
| | 6j. Total. Add lines 6f through 6i. | 6j. | \$86,974.00 | | | |

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| Fill in this information to identify your case: | | | | | | |
|---|------------|-------------|------------------------------|--|--|--|
| Debtor 1 | Kendall | L | Banks | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | | |
| Case number (If known) | | | | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or compa | any with whom you have | the contract or lease | State what the contract or lease is for |
|-----|-----------------|------------------------|-----------------------|--|
| 2.1 | AARON SALES & | LEASE OW | | Furniture Lease, |
| | Name | | | Debtor is Lessee, Lease for Televisions |
| | | | | |
| | 1015 COBB PLAC | CE BLVD NW | | |
| | Number | Street | | |
| | KENNESAW | Georgia | 30144 | |
| | City | State | Zip Code | |

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| | | 50 | odinone ragi | 3 10 01 00 | |
|------------------------|--|---|----------------------------|--|--|
| Fill in this info | rmation to identify your o | case: | | | |
| Debtor 1 | Kendall | L | Banks | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | |
| | | | (State) | | |
| Case number (If known) | | | | | |
| Official | Form 106U | | | | Check if this is an amended filing |
| Official | Form 106H | | | | |
| Schadul | le H: Your Co | dehtors | | | 12/15 |
| Scriedu | e II. Tour Cou | debitor 5 | | | 12/13 |
| known). Answ | er every question. ave any codebtors? (If y | ou are filing a joint case, do | | | te your name and case number (if |
| Idaho, Lo | uisiana, Nevada, New Me | lived in a community proxico, Puerto Rico, Texas, W | | | d territories include Arizona, California, |
| | Go to line 3. | | | | |
| Yes | s. Did your spouse, form | er spouse, or legal equiva | alent live with you at the | time? | |
| | No | | | | |
| | Yes. In which communi | ty state or territory did yo | u live? | Fill in the name and current a | address of that person. |
| | Name of your spouse, | former spouse, or legal equ | iivalent | | |
| | Number Street | | | | |
| | City | State | Zip Co | ode | |
| 0 1- 0-1 | n d Bakalladanan este | hanna Da maa limalin da . | | Marian and the filtrer of the control of the contro | List the manage shares in Res. C |
| o. in Colum | ii i, list all of your code | | | If your spouse is filing with you | List the person shown in line 2 |

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | | | 9 - | | | |
|-------------------------------|---|--|--------------------|-----------------|------------------|--|-----------------------|
| Fill in this in | nformation to identify | your case: | | | | | |
| Debtor 1 | Kendall | L | Banks | ; | | | |
| | First Name | Middle Name | Last N | ame | Che | eck if this is: | |
| Debtor 2 (Spouse, if filin | g) First Name | Middle Name | Last N | ame | — I п | An amended filing | |
| | | | | | | A supplement showing pos | t-petition chapter 13 |
| United State the: | s Bankruptcy Court for | Northern | _ District of Illi | nois State) | | expenses as of the following | |
| Case number | er | | (0 | | | | |
| (If known) | | | | | | MM / DD / YYYY | |
| Official | Form 106I | | | | | | |
| Schedu | ıle I: Your In | come | | | | | 12/15 |
| spouse. If m number (if k | | l, attach a separate she y question. | | | | not include information ional pages, write your I | |
| | our employment | | Debtor 1 | | | Debtor 2 | |
| informat | tion. | Employment status | ✓ Emplo | wed | | Employed | |
| | ive more than one job, separate page with | | | nployed | | Not Employed | |
| informati | on about additional | | | | | | |
| employe | | Occupation | Benavior F | Response Team | Member | _ | |
| | oart time, seasonal, or loyed work. | Employer's name | Helping Ha | and Center | | _ | |
| Occupati | ion may include student | Employer's address | 9649 W. 5 | | | | |
| | maker, if it applies. | | Number Str | reet | | Number Street | |
| | | | | | | | |
| | | | Countrysic | de Illinois | 60525 | | |
| | | | City | State | Zip Code | City Stat | e Zip Code |
| | | How long employed there? | 1 month | | | | |
| Part 2: G | ive Details About N | Nonthly Income | | | | | |
| | | | | | | | |
| spouse unle | ess you are separated. | | - | | - | write \$0 in the space. Includ | |
| , , | ur non-filing spouse have e, attach a separate she | | combine the | information for | all employers fo | or that person on the lines b | elow. If you need |
| | | | | For | Debtor 1 | For Debtor 2 or non-filing spouse | |
| | | ary, and commissions (befo , calculate what the monthly | | 2. | \$2,478.04 | | |
| 3. Estima | ate and list monthly ove | rtime pay. | | 3. | + \$0.00 | | |
| 4. Calcul | ate gross income. Add li | ine 2 + line 3. | | 4. | \$2,478.04 | | |

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| Debt | or 1Kendall L | Banks | | Case numbe | er (if | | |
|----------------------|---|---|-----------|-----------------------|-----------------------------------|-------|-------------------------|
| | First Name Middle | e Name Last Nan | ne | known) For Debtor 1 | For Debtor 2 or non-filing spouse | | |
| Co | py line 4 here | → | 4. | \$2,478.04 | | | |
| 5. Lis | t all payroll deductions: | | | | | | |
| 5a | . Tax, Medicare, and Social Security de | ductions | 5a. | \$414.35 | | | |
| 5b | . Mandatory contributions for retireme | nt plans | 5b. | \$0.00 | | | |
| 5с | . Voluntary contributions for retirement | plans | 5c. | \$0.00 | | | |
| 5d | . Required repayments of retirement fu | nd loans | 5d. | \$0.00 | | | |
| 5e | . Insurance | | 5e. | \$0.00 | | | |
| 5f. | Domestic support obligations | | 5f. | \$0.00 | | | |
| 5g | . Union dues | | 5g. | \$0.00 | | | |
| 5h | . Other deductions. Specify: | | 5h. + | \$0.00 | · | | |
| 6. Ad +5h. | d the payroll deductions. Add lines 5a + | 5b + 5c + 5d + 5e +5f + 5g | 6. | \$414.35 | | | |
| 7. Ca l | Iculate total monthly take-home pay. S | ubtract line 6 from line 4. | 7. | \$2,063.69 | | | |
| 8. Lis | t all other income regularly received: | | | | | | |
| 8a | Net income from rental property and to business, profession, or farm | | | | | | |
| | Attach a statement for each property and gross receipts, ordinary and necessary but the total monthly net income. | | 8a. | \$0.00 | | | |
| 8b | . Interest and dividends | | 8b. | \$0.00 | | | |
| 8c | Family support payments that you, a r dependent regularly receive | on-filing spouse, or a | | | | | |
| | Include alimony, spousal support, child s divorce settlement, and property settlement | | 8c. | \$0.00 | | | |
| 8d | . Unemployment compensation | | 8d. | \$0.00 | | | |
| 8e | Social Security | | 8e. | \$0.00 | | | |
| 8f. | Other government assistance that you Include cash assistance and the value (if I cash assistance that you receive, such as under the Supplemental Nutrition Assistantousing subsidies Specify: Food Assistance Programs Income | known) of any non- food stamps (benefits | 8f. | \$0.00 | | | |
| 8g | . Pension or retirement income | | 8g. | \$0.00 | | | |
| 8h | . Other monthly income. Specify: | | 8h. + | \$0.00 | + <u></u> | | |
| 9. Ad | d all other income Add lines 8a + 8b + 8d | c + 8d + 8e + 8f +8g + 8h. | 9. | \$0.00 | | | |
| | alculate monthly income. Add line 7 + lind the entries in line 10 for Debtor 1 and De | | 10. | \$2,063.69 | + | = | \$2,063.69 |
| In o | tate all other regular contributions to the clude contributions from an unmarried particular or relatives. | ner, members of your househ | old, your | dependents, your room | | | |
| Sp | ecify: | | | | | 11. + | \$0.00 |
| | dd the amount in the last column of line rite that amount on the Summary of Sched | | | | | 12. | \$2,063.69 |
| | • | , | | | • • | | Combined monthly income |
| 13. D | o you expect an increase or decrease v | vithin the year after you file | this form | ? | | | , |
| V | Yes. Explain: Previously receiving Lir | ık, ended in February 2017 | | | | | |

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| | | Do | cument Page 43 of | f 80 | |
|---------------------------------|--|---|---|--|---|
| Fill in this infor | mation to identify you | case: | | | |
| Debtor 1 | Kendall | L | Banks | | |
| Delater | First Name | Middle Name | Last Name | Check if this is: | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | |
| United States B | ankruptcy Court for the | e: Northern | District of Illinois (State) | A supplement showing expenses as of the form | ing post-petition chapter 13 ollowing date: |
| Case number | | | (State) | | _ |
| (If known) | | | | MM / DD / YYYY | |
| Official | Form 106J | | | | |
| Schedul | e J: Your Ex | penses | | | 12/15 |
| information. If i | | d, attach another sheet to t | e are filing together, both are ec his form. On the top of any addit | | = |
| 1. Is this a join | nt case? | | | | |
| ✓ No. Go | to line 2 | | | | |
| Yes. Do | oes Debtor 2 live in a | separate household? | | | |
| | ¬ No | | | | |
| - | ■ TYes. Debtor 2 must | file Official Forms 106J-2, Ex | penses for Separate Household of | Debtor 2. | |
| 2. Do you have | | No | <u> </u> | | |
| Do not list D Debtor 2. | ebtor 1 and | Yes. Fill out this information for each dependent | Dependent's relationship to Debtor 1 or Debtor 2 | - | Does dependent live vith you? |
| 3. Do your exp | | No | | | |
| than | , respectation [C] | Yes | | | |
| yourself and dependents | | | | | |
| Part 2: Estir | mate Your Ongoing | g Monthly Expenses | | | |
| - | f a date after the bar | | ss you are using this form as a si supplemental Schedule J, check | | - |
| | | -cash government assistand I it on Schedule I: Your Inco | | | Your expenses |
| | or home ownership or the ground or lot. 4. | expenses for your residence | . Include first mortgage payments | and | \$700.00 |
| If not incl | uded in line 4: | | | | |
| 4a. Real es | state taxes | | | | 4a \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Kendall L Banks Case number (if known)
First Name Middle Name Last Name

| First Name | Middle Name | Last Name | | |
|---|----------------------------------|--|------------|---------------|
| | | | | Your expenses |
| 5. Additional mortgage payments t | or your residence, such as h | nome equity loans | 5. | \$0.00 |
| 6. Utilities: | | | | |
| 6a. Electricity, heat, natural gas | | | 6a. | \$180.00 |
| 6b. Water, sewer, garbage collection | on | | 6b. | \$0.00 |
| 6c. Telephone, cell phone, Interne | t, satellite, and cable services | | 6c. | \$120.00 |
| 6d. Other. Specify: | | | 6d | \$0.00 |
| 7. Food and housekeeping supplies | 5 | | 7. | \$363.00 |
| 8. Childcare and children's educat | ion costs | | 8. | \$0.00 |
| 9. Clothing, laundry, and dry clean | ing | | 9. | \$100.00 |
| 10. Personal care products and se | rvices | | 10. | \$100.00 |
| 11. Medical and dental expenses | | | 11. | \$25.00 |
| 12. Transportation. Include gas, ma Do not include car payments | intenance, bus or train fare. | | 12. | \$200.00 |
| 13. Entertainment, clubs, recreation | on, newspapers, magazines, | , and books | 13. | \$0.00 |
| 14. Charitable contributions and re | eligious donations | | 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted | d from your pay or included in | lines 4 or 20. | | |
| 15a. Life insurance | | | 15a | \$0.00 |
| 15b. Health insurance | | | 15b | \$0.00 |
| 15c. Vehicle insurance | | | 15c | \$0.00 |
| 15d. Other insurance. Specify: | | | 15d | \$0.00 |
| 16. Taxes. Do not include taxes dedu | icted from your pay or include | ed in lines 4 or 20. | | |
| Specify: | | | 16 | \$0.00 |
| 17. Installment or lease payments: | | | . • | |
| 17a. Car payments for Vehicle 1 | | | 17a | \$0.00 |
| 17b. Car payments for Vehicle 2 | | | 17b | \$0.00 |
| 17c. Other. Specify: | | | 17c | \$0.00 |
| 17d. Other. Specify: | | | 17d | \$0.00 |
| | | you did not report as deducted from | | \$0.00 |
| your pay on line 5, Schedule I, | · | • | 18. | |
| 19.Other payments you make to su | pport others who do not liv | e with you. | | |
| Specify: | -t included in lines 4 or 5 of | fabile forms or on Cohodule I. Vous Income | 19. | \$0.00 |
| 20. Other real property expenses no 20a. Mortgages on other property | | f this form or on Schedule I: Your Income. | 200 | \$0.00 |
| 20b. Real estate taxes. | | | 20a 20b | \$0.00 |
| 20c. Property, homeowner's, or re | enter's insurance | | | \$0.00 |
| 20d. Maintenance, repair, and up | | | 20c | \$0.00 |
| 20e. Homeowner's association or | • • | | 20d | \$0.00 |
| 206. HOMEOWINE S ASSOCIATION OF | CONGOMMUM GUES | | 20e | \$0.00 |

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| Debtor 1 Kendall | | L | Banks | Case number (if known) | | |
|---------------------|---------------------------|---------------------|--|------------------------|-----|------------|
| First Nam | e | Middle Name | Last Name | | | |
| 21. Other. Specify | <u>:</u> | | | | 21 | \$0.00 |
| 00. Calaulata | | | | | | |
| - | ur monthly expenses. | | | | | \$1,788.00 |
| 22a. Add lines | J | | | | | \$0.00 |
| | ` . | | from Official Form 106J-2 | 2 | | \$1,788.00 |
| 22c. Add line 2 | 22a and 22b. The result | is your monthly exp | enses. | | 22. | |
| 23. Calculate you | ır monthly net income |). | | | | |
| 23a. Copy line | 12 (your combined mo | onthly income) from | Schedule I. | | 23a | \$2,063.69 |
| 23b. Copy you | ur monthly expenses fro | om line 22 above. | | | 23b | \$1,788.00 |
| 23c. Subtract y | your monthly expenses | from your monthly i | ncome. | | | \$275.69 |
| The resul | It is your monthly net in | come. | | | 23c | |
| mortgage pay No Yes | | | oan within the year or do y nodification to the terms o | | | |

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| Fill in this information to identify your case: | | | | | |
|---|------------|-------------|------------------------------|--|--|
| Debtor 1 | Kendall | L | Banks | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States Bankruptcy Court for the: | | Northern | District of Illinois (State) | | |
| Case number | | | (| | |

Official Form 106Dec

| П | Check if this is an |
|---|---------------------|
| _ | amended filing |

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | Sign Below | | | | | | | |
|-----|---|---|--|--|--|--|--|--|
| | Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? | | | | | | | |
| | ✓ No | | | | | | | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and | | | | | | |
| × | /s/ Kendall Banks | × | | | | | | |
| | Signature of Debtor 1 | Signature of Debtor 2 | | | | | | |
| | Date 2/22/2017 MM/DD/YYYY | Date MM/DD/YYYY | | | | | | |

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| Fill i | n this info | rmation to ic | entify your c | ase: | | | | | | | | |
|-----------------|---|------------------------------|--|--------------------|----------------|-----------------|---|------------|-------------|---------------|-------------------|--------------------------------------|
| Deb | tor 1 | Kendall First Name |) | L Middle | Name | Bank Last I | s Name | | | | | |
| | tor 2 use, if filing) | First Name | 9 | Middle | Name | Last I | Name | | | | | |
| Unit | ed States | Bankruptcy (| | Northern | | District of I | | | | | | |
| Case (If kno | e number own) | | | | | (| (State) | | | | | |
| Of | ficial | Form | 107 | | | | | | | | | Check if this is a amended filing |
| | | | | I Affairs 1 | for In | dividual | s Filina | for E | Bankru | ptcv | | 12/1 |
| infoi num | rmation. ber (if kn | If more spa lown). Ans | ce is neede wer every qu | estion. | arate sl | neet to this fo | orm. On the | | | | | plying correct ir name and case |
| Par | t 1: Give | e Details A | bout Your | Marital Status | and W | here You Liv | ved Before | | | | | |
| 1. | What is | your currer | t marital sta | tus? | | | | | | | | |
| | ✓ Married✓ Not married | | | | | | | | | | | |
| 2. | During | the last 3 ye | ars, have yo | u lived anywher | e other | than where yo | u live now? | | | | | |
| | ☐ No ✓ Ye | | he places yo | u lived in the las | st 3 years | s. Do not inclu | de where you | ı live now | ·. | | | |
| | De | btor 1: | | | Date: there | s Debtor 1 live | d Debto | r 2: | | | | Dates Debtor 2 lived here |
| | | | | | | | ☐ Sa | ame as De | ebtor 1 | | | Same as Debtor 1 |
| | | 19 SAINT CH mber Street | ARLES RD | | From To | 01/2016 | Numb | er Street | | | | From |
| | Bel Cit | llwood | Illinois State | 60104 Zip Code | | | City | | State | Zip Code | | |
| | | , | Ciaio | Zip Codo | | | | ame as De | | Zip cou | | Same as Debtor 1 |
| | - | 3 23RD AVE | | | From To | 07/2015 | Numb | er Street | | | | From |
| | Bel Cit | llwood | Illinois State | 60104 Zip Code | | | City | | State | Zip Code | <u> </u> | |
| 3. | and territo | <i>ries</i> include <i>i</i> | r s, did you e v Arizona, Califo | | siana, Ne | evada, New Mex | ent in a comr xico, Puerto Ri | | operty stat | e or territor | r y? (Comn | nunity property states |

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Case number (if known)

Banks

Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$2000.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$8000.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$8000.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income Gross income from Describe below. each source Describe below. each source (before deductions (before deductions and exclusions) and exclusions) Link \$388.00 From January 1 of current year until the date you filed for bankruptcy: **Emptied Retirement** For last calendar year: \$500.00 Fund (January 1 to December 31, 2016 Link \$1,358.00 Voluntary Support \$1,050.00 For the calendar year before that: (January 1 to December 31, 2015

Debtor 1 Kendall

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Debtor 1 Kendall Banks Case number (if known) Middle Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other

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| Debtor 1 | Kendall | | L | Ban | ks | Case number | (if known) |
|--------------------|---|---|---|---|--|---|--|
| | First Name | | Middle Name | Last | Name | | |
| Insi con age | ders include your porations of whic int, including one h as child suppor | relatives; ar h you are ar for a busine | ny general partners n officer, director, p ess you operate as | s; relatives of any goerson in control, o | jeneral partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? You are a general partner; I securities; and any managing I domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to a | n insider. | | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| _ | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| insi | der? ude payments on No | debts guar | anteed or cosigne | d by an insider. | Total amount paid | Amount you still owe | n account of a debt that benefited an Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | - - j | | | | | | The state of the s |

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Debtor 1 Kendall Banks Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Civil Pending Cook County Circuit Court Court Name On appeal 50 West Washington Street Case number NumberStreet ✓ Concluded 2016-M4-000992 Illinois 60602 Chicago City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debtor | 1 Kendall | L | Banks | Case number (if known) | | |
|---------|-----------------------------------|--|---|----------------------------------|--------------------------|---------------------|
| | First Name | Middle Name | Last Name | | | |
| | | u filed for bankruptcy, di ke a payment because y | d any creditor, including a ba ou owed a debt? | ank or financial institution, | set off any amou | unts from your |
| Ę | No | | | | | |
| ř | Yes. Fill in the details | i. | | | | |
| _ | _ | | Describe the action the | creditor took | Date action | Amount |
| | | | | | was taken | |
| | | | | | | |
| | Creditor's Name | | - | | | |
| | | | - - | | | |
| | Number Street | | | | | |
| | | | _ Last 4 digits of account n | umber: XXXX- | | |
| | | | | | | |
| | City Sta | ate Zip Code | - | | | |
| | | filed for bankruptcy, was stodian, or another officia | any of your property in the p | ossession of an assignee fo | r the benefit of o | creditors, a court- |
| г | No | | | | | |
| | Yes | | | | | |
| | | | | | | |
| Part 5: | List Certain Gifts a | nd Contributions | | | | |
| 40 1 | Marking and the form | Challenger and a second | d | tal all and an about the address | | |
| 13. \ | within 2 years before yo | u filed for bankruptcy, di | d you give any gifts with a to | tal value of more than \$600 | per person? | |
| | √ No | | | | | |
| Ī | Yes. Fill in the details | s for each gift. | | | | |
| | Gifts with a total val per person | ue of more than \$600 | Describe the gifts | | Dates you gave the gifts | Value |
| | | | | | | |
| | Person to Whom You | Gave the Gift | - | | | |
| | | | - | | | |
| | - | | _ | | | |
| | Number Street | | | | | |
| | City Sta | ate Zip Code | - | | | |
| | Person's relationship to | o you | | | | |
| | | | | | | |
| | | | | | | |
| | Person to Whom You | Gave the Gift | - | | | |
| | | | - | | | |
| | N | | _ | | | |
| | Number Street | | | | | |
| | City Sta | ate Zip Code | - | | | |
| | Person's relationship t | | | | | |
| | | | | | | |

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| | Kendall | L | Banks | Case number (if known |) | |
|------------|--|--|--|------------------------|-----------------------------------|---------------------|
| | First Name | Middle Name | Last Name | | | |
| | | | | | | |
| . Wi | thin 2 years before you file | d for bankruptcy, did | you give any gifts or contributions | with a total value o | f more than \$600 | to any charity? |
| | l No | | | | | |
| | J. | | | | | |
| | Yes. Fill in the details for (| each gift or contributi | on. | | | |
| | Gifts or contributions to | charities | Describe what you contribute | d | Date you | Value |
| | that total more than \$60 | 0 | | | contributed | |
| | | | | | | |
| | Charity's Name | | - | | | • |
| | Chanty's Name | | | | | |
| | | | - | | | |
| | Number Street | | - | | | |
| | Number Street | | | | | |
| | City State | Zip Code | - | | | |
| | Oity State | Zip oode | | | | |
| rt 6· | List Certain Losses | | | | | |
| | | | | | | |
| | No Yes. Fill in the details. Describe the property yo how the loss occurred | u lost and | Describe any insurance cover Include the amount that insuran | | Date of your loss | Value of property |
| | now the loss occurred | | pending insurance claims on lin A/B: Property. | | 1055 | 1051 |
| | | | 1.02.1.000.01 | | | |
| | | | | | | - |
| 7. | List Certain Payments | or Transfore | | | | |
| ab | out seeking bankruptcy or | preparing a bankrup | | | | anyone you consulte |
| ab | out seeking bankruptcy or | preparing a bankrup | | | | anyone you consulte |
| ab | out seeking bankruptcy or lude any attorneys, bankrupt | preparing a bankrup | tcy petition? | | | anyone you consulte |
| ab | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? or credit counseling agencies for service | es required in your ba | nkruptcy. | |
| ab | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? | es required in your ba | | Amount of payment |
| ab | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p | es required in your ba | nkruptcy. Date payment | Amount of |
| ab | out seeking bankruptcy or lude any attorneys, bankrupt No Yes. Fill in the details. | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | out seeking bankruptcy or lude any attorneys, bankrupt No | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p | es required in your ba | Date payment or transfer | Amount of |
| ab | out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street | preparing a bankrup | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | out seeking bankruptcy or clude any attorneys, bankrupt No Yes. Fill in the details. Semrad Law Firm Person Who Was Paid 20 S. Clark Street | preparing a bankrup cy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | preparing a bankrup cy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor | preparing a bankrup cy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State | preparing a bankrup cy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois | preparing a bankrup cy petition preparers, o | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Made the Pay | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Made the Pay | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Was Paid Number Street | preparing a bankrup cy petition preparers, o 60603 Zip Code ment, if Not You | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Made the Pay Person Who Was Paid | preparing a bankrup cy petition preparers, o 60603 Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Was Paid Number Street Street State City State Street Street State State City State Street State | preparing a bankrup cy petition preparers, o 60603 Zip Code ment, if Not You | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Was Paid Number Street | preparing a bankrup cy petition preparers, o 60603 Zip Code ment, if Not You | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |
| ab | Semrad Law Firm Person Who Was Paid 20 S. Clark Street Number Street 28th Floor Chicago Illinois City State Email or website address Person Who Was Paid Number Street Street State City State Street Street State State City State Street State | preparing a bankrup cy petition preparers, o 60603 Zip Code Zip Code | tcy petition? or credit counseling agencies for service Description and value of any p transferred | es required in your ba | Date payment or transfer was made | Amount of payment |

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| Debtor 1 | Kendall | L | Banks | Case number (if known) | | |
|----------|---|-------------------------|---|----------------------------------|-------------------------------------|------------------------------|
| | First Name | Middle Name | Last Name | | | |
| he | Ip you deal with your cree not include any payment o | ditors or to make payr | | your behalf pay or transfer | any property to any | one who promised to |
| | Yes. Fill in the details. | | | | | |
| | | | Description and value of transferred | any property | Date payment or transfer was made | Amount of payment |
| | Person Who Was Paid | | _ | | | |
| | Number Street | | - | | | |
| | City State | Zip Code | - | | | |
| Ind | e ordinary course of your clude both outright transfers d transfers that you have all No Yes. Fill in the details. | s and transfers made as | security (such as the granting of | f a security interest or mortgag | ge on your property). | Do not include gifts |
| _ | • | | Description and value of property transferred | | property or ceived or debts paid | Date transfer was made |
| | Person Who Received Tr | ansfer | - | | | |
| | Number Street | | - - | | | |
| | City State Person's relationship to y | • | _ | | | |
| | Person Who Received Tr | ansfer | - | | | |
| | Number Street | | - - | | | |
| | City State Person's relationship to y | • | - | | | |
| be | thin 10 years before you to neficiary? | | id you transfer any property to | o a self-settled trust or simi | lar device of which | you are a |
| <u>~</u> | No Yes. Fill in the details. | | | | | |
| _ | 1 | | Description and value of | of the property transferred | | Date transfer was made |
| | Name of trust | | | | | |

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Page 55 of 80 Document Debtor 1 Kendall Banks _ Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name

City

Number Street

State

Number

City

Zip Code

Street

State

Zip Code

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Banks Debtor 1 Kendall __ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code

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| Debtor | | | | L | | Banks | Case | e number <i>(ii</i> | f known) | | |
|----------|----------|---------------------------|----------------|------------------------------------|--------------|----------------|---|---------------------|----------------|----------------|----------------------------------|
| | | First Name | | Middle Name | L | ast Name | | | | | |
| 26. H | | e you been a part | y in any judio | cial or administ | trative proc | eeding under | any environmen | tal law? In | ıclude settler | ments and ord | ers. |
| <u> </u> | 4 | No Yes. Fill in the de | tails. | | | | | | | | |
| | | | | | Court or a | gency | | Nature (| of the case | | Status of the case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | | | 7'- 0-1- | | | | Concluded |
| Dowt 1 | 1. | Give Details Al | hout Vour F | Rusinoss or C | City | State | Zip Code | | | | |
| Part 1 | | | | | | | | 6. II | | | -0 |
| 27. W | Vitr | nin 4 years before | | | - | | - | _ | | o any busines: | s? |
| | | | | | - | | r activity, either fo artnership (LLP) | ull-ulfle or p | Jan-ume | | |
| | | A partner in | | | . , | | | | | | |
| | | _ | | anaging execution of the voting or | - | | poration | | | | |
| Į, | ✓ | No. None of the a | | _ | | | | | | | |
| Ĭ | | Yes. Check all the | | | | ow for each b | ousiness. | | | | |
| | | | | | Desc | cribe the nati | ure of the busine | SS | | | number Do not number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | _ | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Nam | e of account | ant or bookkeep | er | From | To | |
| | | | | | | | | | | | |
| | | | | | Desc | cribe the nati | ure of the busine | ss | | | number Do not number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | | | | | Dates busi | ness existed | |
| | | City | State | Zip Code | Nam | e of account | ant or bookkeep | er | From | To | |
| | | | | | | | | | | | |
| | | | | | Doca | rihe the net | ure of the busine | ce | Employer | dentification | number Do not |
| | | | | | Desc | and the lidt | are or the busine | 33 | include So | | number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | — Nam | e of account | ant or bookkeep | er | Dates busi | ness existed | |
| | | City | State | Zip Code | | o o associat | от 200ккоер | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Debto | or 1 Kendall | L | Banks | Case number (if known) |
|--------|--|---|-----------------------------|---|
| | First Name | Middle Name | Last Name | |
| | Within 2 years before y creditors, or other part | | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| ĺ | Yes. Fill in the deta | ails below. | | |
| | _ | | Date issued | |
| | News | | MM/DD/YYYY | |
| | Name | | MIM/DD/TTTT | |
| | Number Street | | _ | |
| | | | <u> </u> | |
| | City | State Zip Code | | |
| Part 1 | 12: Sign Below | | | |
| tro | ue and correct. I unde bankruptcy case can r | rstand that making a false st | atement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | | re of Debtor 1 | | Signature of Debtor 2 |
| | Data 0 | /00/0017 | | Date |
| | id you attach additiona No Yes | /22/2017 al pages to Your Statement o pay someone who is not an a | | luals Filing for Bankruptcy (Official Form 107)? ankruptcy forms? Attach the Bankruptcy Petition Preparer's Notice, |
| | co. Name of person | | | Declaration and Signature (Official Form 119) |

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| Kendall | | L | Banks | Case number (if known) | |
|----------------|--------------|-------------------|----------------------------|------------------------|----------------------------|
| First Name | | Middle Name | Last Name | | |
| Additional P | Page | | | | |
| the last 3 yea | rs, have you | lived anywhere ot | her than where you live n | ow? | |
| | | | | | |
| Debtor 1: | | | Dates Debtor 1 lived there | Debtor 2: | Dates Debtor 2 li there |
| | | | there | | tilere |
| | | | | Same as Debtor 1 | Same as Debt |
| | | | | | Ш |
| 2529 S 15TH | | | From 06/2014 | | From |
| Number Stree | EΣ | | · | Number Street | |
| | | | To <u>06/2015</u> | | To |
| Broadview | Illinois | 60155 | | | |
| City | State | Zip Code | | City State Zip Code | |
| | | | | Same as Debtor 1 | Same as Debt |
| | | | | _ | |
| Number Stree | <u></u> | | From | Number Street | From |
| MULLIDEL OUE | J. | | | Number Officer | To |
| | | | | | |
| | | | | | <u></u> |
| City | State | Zip Code | | City State Zip Code | |
| | | | | Same as Debtor 1 | Same as Debi |
| | | | | _ | _ |
| Number Stree | et | | From | Number Street | From |
| | | | То | | То |
| | | | | | <u> </u> |
| City | State | Zip Code | | City State Zip Code | <u> </u> |
| Oity | State | Zip Code | | | D O D . l . |
| | | | | Same as Debtor 1 | Same as Debi |
| | | | | | |
| Number Stree | et | | From | Number Street | From |
| | | | To | | То |
| | | | | | |
| City | State | Zip Code | | City State Zip Code | <u>—</u> |
| | | • | | Same as Debtor 1 | Same as Debt |
| | | | | | |
| | | | From | | — From |
| Number Stree | et | | From | Number Street | From |
| | | | To | | To |
| | | | | | |
| City | State | Zip Code | | City State Zip Code | |
| | | | | Same as Debtor 1 | Same as Debi |
| | | | | _ | |
| Number Stree | nt . | | From | Number Street | From |
| Mannoer Street | 5 1 | | | Number Sueer | |

City

State

Zip Code

City

State

Zip Code

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B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

| Prior to the filing of this statement I have received Balance Due 2. The source of the compensation paid to me was: Debtor | | | Northern | District of Illinois | | |
|---|-------|---|-------------------------|-----------------------------------|-------------------|-----------------------|
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept Prior to the filing of this statement I have received \$3,650.0 2. The source of the compensation paid to me was: Debtor | In re | Kendall L Banks | | Case I | No | |
| DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR 1. Pursuant to 11 U.S.C. § 329(a) and Fad. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$4,000.0 Prior to the filing of this statement I have received \$380.0 Balance Due \$3,650.0 2. The source of the compensation paid to me was: Debtor | | Debtor | | | | , |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the abovenamed debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept S3,600.0 Prior to the filing of this statement I have received S360.0 Balance Due S3,660.0 2. The source of the compensation paid to me was: Debtor Other (specify) 3. The source of the compensation paid to me is: Debtor Other (specify) 4. Have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. Thave agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy. b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION Loertify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. PAF Nan P Cretty Segnature of Allomey | | | | Chapt | er | Chapter 13 |
| compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept 94,000.0 Prior to the filing of this statement I have received 8360.0 8alance Due 2. The source of the compensation paid to me was: Debtor | | DISCLOSURE OF | COMPENSA | TION OF ATTORN | NEY FOR I | DEBTOR |
| Prior to the filing of this statement I have received Balance Due 2. The source of the compensation paid to me was: Debtor | 1. | compensation paid to me within one | year before the filing | of the petition in bankruptcy, or | agreed to be paid | d to me, for services |
| 2. The source of the compensation paid to me was: □□ Debtor □□ Other (specify) 3. The source of the compensation paid to me is: □□ Debtor □□ Other (specify) 4. □□ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. Or the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. Signature of Atomey Signature of Atomey Semrad Law Firm | | For legal services, I have agreed to a | ccept | | | \$4,000.00 |
| 2. The source of the compensation paid to me was: Debtor | | Prior to the filing of this statement I | have received | | | \$350.00 |
| Debtor | | Balance Due | | | | \$3,650.00 |
| 3. The source of the compensation paid to me is: Debtor | 2. | The source of the compensation pai | d to me was: | | | |
| Debtor ☐ Other (specify) 4. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. ☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 Date Signature of Attomey Semrad Law Firm | | Debtor | Other (s | pecify) | | |
| 4. | 3. | The source of the compensation pai | d to me is: | | | |
| I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. //s/ Ryan P Crotty Signature of Attomey Semrad Law Firm | | Debtor | Other (s | pecify) | | |
| members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. 5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filling of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 Date Signature of Attorney Semrad Law Firm | 4. | | | ensation with any other person (| unless they are | |
| a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 Date Signature of Attorney Semrad Law Firm | | members or associates of my la | w firm. A copy of the a | | | |
| c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 /s/ Ryan P Crotty Date Signature of Attorney Semrad Law Firm | 5. | a. Analysis of the debtor's finar | | | | |
| d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters; 6. By agreement with the debtor(s), the above-disclosed fee does not include the following services: CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 /s/ Ryan P Crotty Date Signature of Attorney Semrad Law Firm | | b. Preparation and filing of any | petition, schedules, st | tatements of affairs and plan wh | nich may be requi | red; |
| CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 | | c. Representation of the debtor | at the meeting of cred | ditors and confirmation hearing | and any adjourn | ed hearings thereof; |
| CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 /s/ Ryan P Crotty Date Signature of Attorney Semrad Law Firm | | d. Representation of the debtor | in adversary proceedi | ngs and other contested bankri | uptcy matters; | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 /s/ Ryan P Crotty Date Signature of Attorney Semrad Law Firm | 6. | By agreement with the debtor(s), the | above-disclosed fee o | does not include the following s | ervices: | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 /s/ Ryan P Crotty Date Signature of Attorney Semrad Law Firm | | | | | | |
| I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. 2/22/2017 /s/ Ryan P Crotty Date Signature of Attorney Semrad Law Firm | | | | | | |
| debtor(s) in this bankruptcy proceedings. 2/22/2017 Date /s/ Ryan P Crotty Signature of Attorney Semrad Law Firm | | | | | | |
| Date Signature of Attorney Semrad Law Firm | | | te statement of any ag | reement or arrangement for pay | ment to me for re | epresentation of the |
| Semrad Law Firm | | 2/22/2017 | | /s/ Ryan P Cro | tty | |
| | | Date | | Signature of Attor | ney | |
| | | | | Semrad Law Fir | m | |
| Name of law firm | | | | Name of law fin | n | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | | filing fee administrative fee |
|---|-------|----------------------------------|
| + | · · | |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Banks, Kendall L Debtor(s) | Case No | |
|----------------|---|--|-------------------------------------|
| | | Chapter. | Chapter13 |
| | VERIFIC | ATION OF CREDITOR MAT | RIX |
| T knowledge | he above named Debtors hereby verify e. | that the attached list of creditors is tr | ue and correct to the best of their |
| Date: | 2/22/2017 | /s/ Banks, Kenda Banks, Kendall L Signature of Deb | - |

U S DEPT OF ED/GSL/ATL PO BOX 2287 ATLANTA, GA, 30301

ISAC PO Box 6180 Indianapolis, IN, 46206

MERCHANTS CREDIT GUIDE 223 W JACKSON BLVD # 700 Chicago, IL, 60606

Loyola Univeristy Health Systems 2160 S. First Ave Maywood, IL, 60153

West Lake Hospital 1225 w lake st Melrose Park, IL, 60160

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN, 56303

Verizon Wireless 777 Big Timber Rd Elgin, IL, 60123

MBB 1550 N NORTWEST HWY STE 403 PARK RIDGE, IL, 60068

AARON SALES & LEASE OW 6071 Broadway Merrillville, IN, 46410

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

TMobile P.O. Box 742596 Cincinnati, OH, 45274 HARVARD COLL 4839 N Elston Ave Chicago, IL, 60630

NATIONWIDE CREDIT & CO 815 COMMERCE DR STE 270 OAK BROOK, IL, 60523

TORRES CRDIT 27 fairview st suite 301 CARLISLE, PA, 17013

Comed Po Box 805379 Chicago, IL, 60680

IRS 1 PO Box 7346 Philadelphia, PA, 19101

IL Depart of Revenue PO Box 64338 Bankruptcy Section Chicago, IL, 60664

Comcast p.o. box 196 Newark, NJ, 07101

DirecTV PO Box 105261 Atlanta, GA, 30348

Smith, Leon 2219 Saint Charles Rd Bellwood, IL, 60104

FONDREN, BRIAN T 5923 S Artesian Ave Chicago, IL, 60629

Bradley K Sullivan, Attorney at Law 221 South LaSalle Street Suite 1906 Chicago, IL, 60601 AT&T PO Box 537104 Atlanta, GA, 30353

IDES Bankruptcy Department 33 S State St Ste 800 Chicago, IL, 60603

U.S. Attorney General 219 S. Dearborn St., 5th Floor Chicago, IL, 60604

City of Chicago Parking 121 N. LaSalle St # 107A Chicago, IL, 60602

Arnold Scott Harris 111 W. Jackson # 600 Chicago, IL, 60604

Village of Forest Park 517 Desplaines Ave Forest Park, IL, 60130

Village of Bellwood 3200 Washington Blvd Bellwood, IL, 60104

TCF Bank 601 W 14th Street Chicago Heights, IL, 60411

Bank of America 1701 River Oaks Dr # D Calumet City, IL, 60409

US Bank Po Box 5229 C/O Bankruptcy Department Cincinnati, OH, 45201

JPMORGAN CHASE BANK Po Box 659754 San Antonio, TX, 78265 PLS - Bankruptcy 8026 S Cicero Ave Burbank, IL, 60459

FIFTH THIRD BANK PO Box 9013 Addison, TX, 75001

Village of Oak Park P.O. Box 457 Wheeling, IL, 60090

Northern Illinois University 1425 W Lincoln Hwy Dekalb, IL, 60115

AARON SALES & LEASE OW 6071 Broadway Merrillville, IN, 46410

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| Debtor 1 Kendall First Name | L Middle Name | Banks Last Name | Case number (if known) | |
|---|---|---|--|--|
| Pario Answer These Qu | estions for Reporting Purpose | · · · · · | | |
| 16. What kind of debts do you have? | 16a. Are your debts primaril "incurred by an individual" No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril money for a business or No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts y | al primarily for a persone y business debts? Busin investment or through the | al, family, or household ness debts are debts the he operation of the bus | purpose." nat you incurred to obtain siness or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | No. | | fter any exempt property istribute to unsecured cr | r is excluded and administrative editors? |
| 18. How many creditors do you estimate that you owe? | 7 1-49 50-99 1 100-199 200-999 | 1,000-5,000 5,001-10,000 10,001-25,00 | | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | \$50 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | \$50 million \$100 million | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion |
| | under Chapter 7. If no attorney represents me and out this document, I have obtain I request relief in accordance will understand making a false state connection with a bankruptcy coboth. 18 U.S.C. §§ 152, 1341, 1 /s/Kendall Banks Signature of Debtor 1 Executed on 2/17/2017 | napter 7, I am aware that I understand the relief and I did not pay or agree to ned and read the notice reth the chapter of title 11, sement, concealing properties can result in fines up 519, and 3571. | I may proceed, if eligiby ailable under each charpon pay someone who is required by 11 U.S.C. § United States Code, setty, or obtaining mone | le, under Chapter 7, 11,12, or 13 apter, and I choose to proceed not an attorney to help me fill § 342(b). specified in this petition. By or property by fraud in sonment for up to 20 years, or |
| | MM / DD | | | MM / DD / YYYY |

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| Fill in this into | rmation to identify yo | ur case! | | | |
|---------------------------------|---|---------------------------------|---|---|--|
| Debtor 1 | Kendall | L | Banks | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | * # # | | | |
| 11-2-4-0 | | Middle Name | Last Name | | |
| United States I | Bankruptcy Court for t | he: Northern | District of Illinois | | |
| Case number | 71/11/14 | | (State) | | |
| Lancary | | | | | |
| | Form 106D | | | | Check if this is a amended filing |
| Declarat | ion About a | n Individual Debto | r's Schedules | ; | 12/1 |
| If two married | people are filing tog | ether, both are equally respons | ible for supplying correc | t information. | |
| Parink Sign | Below | | | aking a false statement, concealing proper \$250,000, or imprisonment for up to 20 yea | ACCORDING TO SECURITION OF THE PROPERTY OF THE |
| Did you p | ay or agree to pay so | omeone who is NOT an attorney | to help you fill out bank | cruptcy forms? | |
| √ No | | | | | |
| Yes. 1 | Vame of person | | Attach Bankruptcy F Signature (Official Fo | Petition Preparer's Notice, Declaration, and orm 119). | |
| | | | | | |
| | | | | | |
| | | | | | |
| Under pen that they : | alty of perjury, I dec are true and correct. | lare that I have read the summa | ary and schedules filed v | with this declaration and | |
| 🗶 /s/ Kenda | ill Banks | | × | | |
| Signature o | \ r6 | | | of Debtor 2 | MATERIAL STATE OF THE STATE OF |
| Date 2/17 | | | Date | | |
| MM/ | DD/YYYY | | | 1/DD/YYYY | |

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| Debtor 1 | Kendall First Name | L Middle Name | Banks | Case number (if known) |
|-----------------|---|--------------------------------------|---|--|
| | | | Last Name | |
| 28. Wi | thin 2 years before yo editors, or other partic | u filed for bankruptcy, did y es. | ou give a financial stater | ment to anyone about your business? Include all financial institutions |
| Z | No | | | |
| L | Yes. Fill in the details | s below. | | |
| | | | Date issued | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | | |
| | | | _ | |
| | | State Zip Code | | |
| Part 12: | Sign Below | | | |
| true ; a bar | nkruptcy case can res | ult in fines up to \$250,000, | atement, concealing prop or imprisonment for up to | ments, and I declare under penalty of perjury that the answers are erty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Date 2/17 | /2017 | | Date |
| | ou attach additional p lo 'es ou pay or agree to pay | | | iduals Filing for Bankruptcy (Official Form 107)? bankruptcy forms? |
| III Y | es. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| III 16: | Banks, Kendali L | | |
|----------------|--------------------------------|--|----------------------------------|
| | Debtor(s) | Case No | |
| | | Chapter. | Chapter13 |
| | VERI | FICATION OF CREDITOR MATE | RIX |
| Th nowledge | e above named Debtors hereby v | rerify that the attached list of creditors is true | and correct to the best of their |
| ate: | 2/17/2017 | /s/ Banks, Kendali I | |
| | | Banks, Kendali L | |

02/22/2017 WED 9:15 FAX

☑001/001

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| Debto | or 1 | Kendali First Name | L Middle Nama | Banks Last Name | Case number (If known) | |
|--------|-------------------------|---|--|--|--|------------------|
| 16. | Ca | iculate the median t | family income that applies to yo | u. Follow these ste | ps: | " |
| | 16 | s. Fill in the state in t | which you live. | Illinois | _ | |
| | 16 | b. Fill in the number | of people in your household. | 1 | | |
| | 16 | | family income for your state and s | | annyannayan taganan ayanay ya annaay ta ga ta ta ta a ta a ta a ta a ta a | \$50,133,00 |
| | | household using the link spe | cified in the separate instructions | | nd a list of applicable median income amounts, go online at may also be avaliable at the bankruptcy clerk's office. | |
| 17. | Ho | w do the lines com | pare? | | | |
| | 17 | ia. Line 15b is le determined ui 2). | ss than or equal to line 16c. On the nder 11 U.S.C. § 1325(b)(3), Go to | ne top of page 1 of p Part 3. Do NOT fi | this form, check box 1, <i>Disposable income is not</i> ii out <i>Calculation of Disposable Income</i> (Official Form 122C- | |
| | 171 | U.S.C. § 1325 | ore than line 18c. On the top of p 5(b)(3). Go to Part 3 and fill out 0 ur current monthly income from lin | alculation of Disp | check box 2, <i>Disposable Income is determined under 11</i> psable Income (Official Form 122C-2). On line 39 of that | |
| Part : | 3: | Calculate Your C | ommitment Period Under 11 | U.S.C. §1325(b) |)(4) | |
| 18. | | | se monthly income from line 11. | | manahanda ata anaman ahata satu cama cara a car | \$344.00 |
| 19. | | | | | s is not filing with you, and you contend that calculating the of your spouse's income, copy the amount from line 13. | |
| | 19 | a. If the marital adjust 19a. | atment does not apply, fill in 0 on i | ine grand action in | MOTIVATE OF MATERIAL AND | -\$0.00 |
| | | o. Subtract line 19a | | | | \$344.00 |
| 20. | Ca | Iculate your current | t monthly income for the year. Fo | ollow these steps: | | E244 00 |
| | 20 | a. Copy line 19b. | number of months in a year). | | | \$344.00 x 12 |
| | | | • | | | \$4,128,00 |
| | 201 | o. The result is your | current monthly income for the yea | ar for this part of the | e fami. | 34,128.00 |
| | 20 | c. Copy the median 16c. | family income for your state and s | ize of household fro | om line | \$50,133.00 |
| 21. | Ho | w do the lines com | oare? | | | |
| | $\overline{\mathbf{Z}}$ | | n line 20o. Unless otherwise orde is 3 years, Go to Part 4. | red by the court, or | n the top of page 1 of this form, check box 3, The | |
| | | Line 20b is more th box 4, The committee | an or equal to line 20c. Unless of ment period is 5 years, Go to Part | herwise ordered by 4. | the court, on the top of page 1 of this form, check | |
| Part / | 4: . | Sign Below | | | | |
| | | By signing here, i d | leclare under penalty of parjury th | at the information of | on this statement and in any attachments is true and correct | |
| | | | | | | |
| | | ✗ /s/ Kendall E | | | X K. Tongal . Y x | |
| | | Signature of D | ebtor 1 | | Signature of Debtor 2 | |
| | | Date 2/21/201 MM/DD/1 | | | Date 2 (22// | |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above,

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B2030 (Form 2030) (12/15)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| re | Kendall L Banks | Not thorn blother of | Case No. | |
|-------------|---|--|--|--|
| _ | Debtor | , | Odse No. | (If known) |
| | | | Chapter | Chapter 13 |
| | DISCLOSURE OF CO | MPENSATION C | F ATTORNEY F | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. E compensation paid to me within one year rendered or to be rendered on behalf of the | Bankr. P. 2016(b), I certify that | I am the attorney for the abo | ovenamed debtor(s) and that |
| | For legal services, I have agreed to accept | | | \$4,000.00 |
| | Prior to the filing of this statement I have a | received | | \$350.00 |
| | Balance Due | | | \$3,650.00 |
| 2. | The source of the compensation paid to m | ne was: | | |
| | Debtor | Other (specify) | | |
| 3. | The source of the compensation paid to m | ne is: | | |
| | Debtor | Other (specify) | | |
| 4. | I have not agreed to share the above-c members and associates of my law firr | disclosed compensation with m. | any other person unless they | / are |
| | I have agreed to share the above-discle members or associates of my law firm. the people sharing in the compensatio | . A CODY Of the agreement, too | her person or persons who a gether with a list of the name | re not s of |
| 5. | In return for the above-disclosed fee, I have a. Analysis of the debtor's financial si bankruptcy; | e agreed to render legal servic tuation, and rendering advice | e for all aspects of the bankr to the debtor in determining | ruptcy case, including: whether to file a petition in |
| | b. Preparation and filing of any petitio | on, schedules, statements of a | uffairs and plan which may be | e required: |
| | c. Representation of the debtor at the | | | |
| | d. Representation of the debtor in adv | | | |
| 6. I | By agreement with the debtor(s), the above | | | |
| | | | | |
| | | CERTIFICATION | | |
| l c btor | ertify that the foregoing is a complete state (s) in this bankruptcy proceedings. | ement of any agreement or arr | angement for payment to me | e for representation of the |
| | 2/17/2017 | | /s/ Ryan P Crotty | |
| ••• | Date | | Signature of Attorney | |
| | <u></u> | | Semrad Law Firm | |
| | | The state of the s | Name of law firm | |



UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.



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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

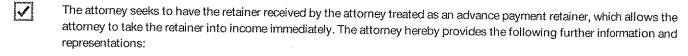
C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.



D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

E.V.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76
- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

| Date: | 2/17/2017 | |
|-----------|-----------|------------------------|
| Signed: | | |
| /s/ Kenda | all Banks | /s/ Ryan P Crotty |
| Debtor(s) | | Attorney for Debtor(s) |

Do not sign if the fee amounts at top of this page are blank.